

Louisville Recreation & Senior Center  
2017-2018 Preschool Payment Agreement

Parent/Guardian Name \_\_\_\_\_

Child's Name \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone \_\_\_\_\_ E-mail \_\_\_\_\_

I (we) hereby authorize the City of Louisville/Louisville Recreation & Senior Center to initiate monthly debit entries on the 1st of each month to my (our) checking account. I will provide a voided check for the account information.

Total authorized amount to be \$ \_\_\_\_\_ (\*total remaining) to be paid in 8 monthly installments of \$ \_\_\_\_\_ (\*\*monthly tuition) to begin on September 1, 2017 and ending on April 1, 2018.

**Total Remaining Tuition for School Year\***  
\$1,800 Res / \$2,256 NonRes

**Monthly Tuition \*\***  
\$225 Res / \$282 NonRes

I (we) understand that this agreement is an instrument for payment for preschool enrollment and I (we) are obligated to fulfill this agreement completely. I (we) understand that the program enrollment is non-transferable or assignable and that the cancellation policy must be followed to terminate the debits. The undersigned states that he/she has read and understands the terms of this agreement.

Account Holder Signature \_\_\_\_\_ Date \_\_\_\_\_

Please attach a voided check here: